

**COMBINED DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled CD44 LIGANDS, the specification of which was filed on September 15, 2003 as Application Serial No. 10/663,244.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim the benefit under Title 35, United States Code, §119(e)(1) of any United States provisional application(s) listed below:

<u>U.S. Serial No.</u>	<u>Filing Date</u>	<u>Status</u>
60/410,758	September 13, 2002	Pending
60/469,123	May 9, 2003	Pending

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Louis Myers, Reg. No. 35,965

Laurie Butler Lawrence, Reg. No. 46,593

John W. Freeman, Reg. No. 29,066

Leda Trivinos-Lagos, Reg. No. 50,635

Ivana Maravić-Magovčević, Reg. No. 43,338

Address all telephone calls to **LOUIS MYERS** at telephone number (617) 542-5070.

Direct all correspondence to Customer Number : **26161**.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name of Inventor: ISAAC J. RONDON

Inventor's Signature:

Residence Address:

Citizenship:

Post Office Address:

San Francisco, CA

Venezuela

3731 Market Street

San Francisco, CA 94131

United States of America

Date:

11/13/03



Combined Declaration and Power of Attorney

Page 2 of 2 Pages

Full Name of Inventor: ALBERT EDGE

Inventor's Signature: _____ Date: _____
Residence Address: Newton, Massachusetts
Citizenship: United States of America
Post Office Address: 208 Homer Street
Newton, Massachusetts 02459
United States of America

Full Name of Inventor: RACHEL BARIBAUT KENT

Inventor's Signature: Rachel Baribault Kent Date: Nov. 3, 2003
Residence Address: Boxborough, Massachusetts
Citizenship: United States of America
Post Office Address: 60 Stonehedge Place
Boxborough, Massachusetts 01719
United States of America



Combined Declaration and Power of Attorney

Page 2 of 2 Pages

Full Name of Inventor: ALBERT EDGE

Inventor's Signature: _____

Date: _____

Residence Address:

Newton, Massachusetts

Citizenship:

United States of America

Post Office Address:

208 Homer Street

Newton, Massachusetts 02459

United States of America

Full Name of Inventor: RACHEL BARIBAULT KENT

Inventor's Signature: _____

Date: _____

Residence Address:

Boxborough, Massachusetts

Citizenship:

United States of America

Post Office Address:

60 Stonehedge Place

Boxborough, Massachusetts 01719

United States of America